

## Application Data Sheet

### APPLICATION INFORMATION

Application Number::	
Filing Date::	November 24, 2003
Application Type::	Regular
Subject Matter::	Utility
Title::	MODAFINIL FORMULATIONS
Attorney Docket Number::	225326
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	No
Petition Included?::	No

### APPLICANT INFORMATION

Applicant Authority Type::	Inventor
Primary Citizenship Country::	IL
Status::	Full Capacity
Given Name::	Moshe
Middle Name::	
Family Name::	Bentolila
City of Residence::	Beer Sheva
State or Prov. of Residence::	
Country of Residence::	IL
Street of mailing address::	22/17 Rachel Imenu Str., Nachal Ashan
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	IL
Postal or Zip Code of mailing address::	84513

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: IL  
Status:: Full Capacity  
Given Name:: Aldo  
Middle Name::  
Family Name:: Shusterman  
City of Residence:: Beer Sheva  
State or Prov. of Residence::  
Country of Residence:: IL  
Street of mailing address:: 11 Shlomo Sakosky St.  
City of mailing address:: Beer Sheva  
State or Province of mailing address::  
Country of mailing address:: IL  
Postal or Zip Code of mailing address:: 84255

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: IL  
Status:: Full Capacity  
Given Name:: Moshe  
Middle Name::  
Family Name:: Arkin  
City of Residence:: Kfar Shmariahu  
State or Prov. of Residence::  
Country of Residence:: IL  
Street of mailing address:: 22 Derech Haganim  
City of mailing address:: Kfar Shmariahu  
State or Province of mailing address::  
Country of mailing address:: IL  
Postal or Zip Code of mailing address:: 546910

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: IL

Status:: Full Capacity  
Given Name:: Joseph  
Middle Name::  
Family Name:: Kaspi  
City of Residence:: Givatayim  
State or Prov. of Residence::  
Country of Residence:: IL  
Street of mailing address:: 13 Borochoy St.  
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Country of mailing address:: IL  
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#### **CORRESPONDENCE INFORMATION**

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#### **REPRESENTATIVE INFORMATION**

Representative Customer Number:: 23460

Representative Designation:: Registration Number:: Representative Name::

#### **DOMESTIC PRIORITY INFORMATION**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

## FOREIGN APPLICATION INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed
Israel	153,098	11/26/2002	Yes

## ASSIGNEE INFORMATION

Assignee name:: CHEMAGIS LTD.  
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State or Province of  
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